

Please follow the directions for completing the Homeland Security Application Form. Applications not filled out completely will be returned. This will cause a delay in processing your application. All applications must be submitted at least fourteen (14) days prior to a scheduled meeting. The application process is as follows:

1. The Homeland Security Advisory Committee (HSAC) will review the application and prioritize based upon The Columbus Urban Area Homeland Security Strategy for FY 2006 and verify that it meets eligibility under the Department of Homeland Security requirements.
2. Submissions that are forwarded to the Technical/Operations Committee will be, but not limited to, survey community resources and needs and recommend equipment standards, shared-use protocols, as well as review, recommend and assign priority to the HSAC.
3. All submissions will then be transmitted to the HSAC with a recommendation or no recommendation for funding based upon the Columbus Urban Area Homeland Security Strategy and the Franklin County Threat, Risk, and Needs Assessment.
4. After the HSAC has reached a final decision, you will be notified by mail regarding the status of your application. Please remember that when applying for grant funds, it must be approved at different levels of government therefore an exact timeframe cannot be given.

1. **Application Number:** This will be completed by the Technical/Operation Committee.

2. **Date:** Date you are applying for funds.

3. **Applicant Name:** Name of political subdivision.

4. **New Request:** Indicate      YES or      NO

**Revision:** Indicate      YES or      NO

**Expansion** Indicate      YES or      NO

5. **Is This A Regional Proposal?** Indicate      YES or      NO.

**If You Answered Yes To The Above Question, Identify Each Political Subdivision And Disciplines**

**Partnering In The Project. Must Be Complete With Name And Addresses Of All Political**

**Subdivision(s):** A letter(s) of commitment from political subdivision(s) and discipline(s) taking responsibility of equipment must be attached.

6. **Contact Person:** Person responsible for completing the application and knowledgeable of equipment and/or services requested.

7. **Telephone Number:** The telephone number of the contact person.

8. **Email Address:** Email address of the contact person.

**9. Please Describe Your Request:** This must include the breakdown cost of each item and where the information originated.

**10. Describe Equipment And/Or Services Required To Accomplish Goals:** Must be completed.

**11. If Applicable, Please List The Address That The Equipment Will Be Permanently Located: (For Inspection And Auditing Purposes)** The EMA, County, and/or City have the right to audit and inspect equipment purchased with grant funds.

**12. By Signing The Form Below, I Understand That The Requesting Political Subdivision Is Responsible For The Insurance, Maintenance, Repairs, Licenses, Etc. Of All Equipment Received:** The Emergency Management Agency for Franklin County, City of Columbus, and/or Franklin County is **not** responsible for the insurance, maintenance, licensing, repairs, or any other costs incurred with the equipment purchased from grant funds. This is solely the responsibility of the political subdivision.

I, \_\_\_\_\_

(Name)

CEO of \_\_\_\_\_, Have Reviewed And Approved

(Political Subdivision)

This Application On \_\_\_\_\_: The application must be reviewed and signed by the

(Month, Day, Year)

individual who has the authority, acting as the CEO of the political subdivision, that they accept and agree to the terms set forth by the Terrorism Advisory Team.